Case 19-11214-mkn Doc 22 Entered 05/29/19 14:29:33 Page 1 of 22

Fill in	this inf	ormation to id	entify your	case:		ī		
Debto	r 1		IA EQUEL					
Debto	r 2	First Name		Middle Name	Last Name			
(Spouse		First Name		Middle Name	Last Name			
United	l States I	Bankruptcy Co	urt for the:	DISTRICT OF NEVADA				
Case r	number 1)	<u>19-11214-N</u>	1KN				☐ Check	if this is an
			 -				amend	led filing
- 55:			_					
		orm 106						
Sum Be as c	mary	OT YOUR	ASSETS A	and Liabilities and	Certain Statistical Informa filing together, both are equally respon	tion	1	2/15
ıntorma	ation. Fi	ii out ali of yo	ur schedule	s first: then complete the in	nling together, both are equally resporn nformation on this form. If you are filing e box at the top of this page.	amende	er supplyin ed schedul	g correct es after you file
Part 1:		marize Your A		isw outlineary and check the	e box at the top of this page.			
**	-							and the second s
							Your as Value o	sets what you own
1. Se	chedule a. Copy l	A/B: Property ine 55, Total re	r (Official Fo	rm 106A/B) om Schedule A/B			\$	408,850.00
16	o. Copy I	ine 62, Total po	ersonal prop	erty, from Schedule A/B			\$	3,000.00
10	c. Copy I	ine 63, Total of	all property	on Schedule A/B			\$	411,850.00
Part 2:	Sum	marize Your L	iabilities					111,000
							Your lia Amount	bilities you owe
2. So 2a	chedule i i. Copy t	D: Creditors W he total you list	ho Have Cla ed in Colum	ims Secured by Property (Offi n A, Amount of claim, at the b	icial Form 106D) pottom of the last page of Part 1 of <i>Schedu</i>	ile D	\$	330,000.00
3. Sc	chedule l	E/F: Creditors	Nho Have U	nsecured Claims (Official For	m 106E/F)			
					om line 6e of Schedule E/F		\$	0.00
3b	. Copy	the total claims	from Part 2	(nonpriority unsecured claims	s) from line 6j of Schedule E/F		\$	0.00
					V			
					Your total lial	bilities	\$	330,000.00
Part 3:	Sumi	narize Your In	come and E	Expenses		_		
4. Sc		: Your Income	•					-
	py your	combined mon	thly income	from line 12 of Schedule I		•••••	\$	2,198.00
		l: Your Expens monthly expen					\$	1,516.00
Part 4:	_			dministrative and Statistica			· 	
5. Ar		·		Chapters 7, 11, or 13?			-	
					this box and submit this form to the court	with you	r other sche	dules.
	Yes							
7. W ł	nat kind	of debt do yo	u have?					
	Your house	debts are prim hold purpose."	narily consu	mer debts. Consumer debts 101(8). Fill out lines 8-9g for	are those "incurred by an individual prima statistical purposes. 28 U.S.C. § 159.	rily for a	personal, f	amily, or
	Your		primarily co	nsumer debts. You have no	thing to report on this part of the form. Che	eck this l	box and sub	omit this form to
Official I	Form 10	-			and Certain Statistical Information		pa	ge 1 of 2

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Deb	otor 1 CYNTHIA EQUELS	Case number (if known) 19-11214	-MKN_	
8.	From the Statement of Your Current Monthly Income: Copy your total curr 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	ent monthly income from Official Form	\$	1,400.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total	claim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) 	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

		Case 19-1	11214-mkn	Doc	22	Entered 05/29/19 14:	29:33	Page 3 c	T 22	
Fillf	n this inform	ation to identif	y your case and t	this fili	ng:					
Debi	tor 1	CYNTHIA E	·							
) ahi	tor 2	First Name	Midd	le Name		Last Name				
	ise, if filing)	First Name	Midd	ile Name		Last Name				
Jnite	ed States Ban	kruptcy Court fo	r the: DISTRICT	OF NE	VADA					
Case	e number 1	9-11214-MKN								if this is a ed filing
- cc		4004	_					-		ou ming
		m 106A/E	_							
		e A/B: P				once. If an asset fits in more than on			12/15	
	Yes. Where is t	the property?								
.1	4 E20 WAC	DALWUEEL DE	5	Wha	t is the	property? Check all that apply				
_		ON WHEEL DF available, or other des	<u></u>		Duple	e-family home ex or multi-unit building ominium or cooperative	the amoun	it of any secure	aims or exempti d claims on <i>Scl</i> ns Secured by	nedule D:
	Henderson	NV	89002-0000		-] Manu] Land	factured or mobile home	Current va	alue of the perty?	Current valu	
•	City	State	ZIP Code		-	tment property	\$4	08,850.00	\$40	8,850.00
					l Times l Other		Describe t	the nature of y	our ownership ancy by the en	interest
				Who	has an	interest in the property? Check one	a life estat	te), if known.	ancy by the en	ureues, o
	Clark				_	er 1 only				-
_	County				_	or 2 only or 1 and Debtor 2 only				
						st one of the debtors and another		k if this is com structions)	munity proper	ty
						nation you wish to add about this ite ntification number:	m, such as lo	ocal		
2. A	ages you hav •••	value of the po ve attached for l	ortion you own fo Part 1. Write that	Othe prop	er inform erty ide	nation you wish to add about this ite	m, such as lo	structions)	\$408,8	_

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B

Schedule A/B: Property

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Deb	tor 1 CYNTHIA EQU	UELS			ase number (if known)	19-11214-MKN
3. C a	ars, vans, trucks, tracto	ors, sport utility veh	nicles, motorcycles			
	No					
	Yes					
3.1	Make: TOYOTA		Who has an interest in the pr	onartu? Chaak ana	Do not deduct secu	ured claims or exemptions. Put
	Model: TUNDRA		Debtor 1 only	Operty / Check one	the amount of any	secured claims on Schedule D:
	Year: 2003		Debtor 2 only			ve Claims Secured by Property.
	Approximate mileage:		Debtor 1 and Debtor 2 only		Current value of to entire property?	he Current value of the portion you own?
	Other information:		At least one of the debtors a	and another	proporty	portion you own;
			_			
			☐ Check if this is community (see instructions)	property	\$2,000	.00 \$2,000.00
.pa Part 3	dd the dollar value of th ges you have attached Describe Your Personal	for Part 2. Write th	for all of your entries from at number heresssssssssssssssssssssssssssssss	*	ny entries for =>	\$2,000.00
Ex	u sehold goods and fur r amples: Major appliance: No Yes. Describe	n ishings s, furniture, linens, c	hina, kitchenware			Current value of the portion you own? Do not deduct secured claims or exemptions.
	Œ	IOUSEHOLD GO	ODS			\$500.00
7. Elei	ctronics	radios: audio vidos	otoroo and digital			
= ;	including cen pri	ones, cameras, med	, stereo, and digital equipmen fia players, games	it, computers, printer	s, scanners; music col	lections; electronic devices
Exa	outer collections	urines; paintings, pri , memorabilia, collec	nts, or other artwork; books, p ctibles	pictures, or other art	objects; stamp, coin, o	or baseball card collections;
1						
	res. Describe					
Equ Exe	musicai mstrume	phic, exercise, and	other hobby equipment; bicyc	les, pool tables, golf	clubs, skis; canoes an	nd kayaks; carpentry tools;
	es. Describe					
_Ex	earms :amples: Pistols, rifles, sh	notguns, ammunitior	n, and related equipment			
□ <i>Y</i>	lo ′es. Describe					

Official Form 106A/B

Schedule A/B: Property

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Debtor 1	CYNTHIA EQUEL	s	Case	number (if known)	19-11214-MKN
□ No	ples: Everyday clothes,	furs, leather coats, desi	gner wear, shoes, accessories		
Yes.	Describe				
	WE	ARING APPAREL			\$100.00
■ No		costume jewelry, engago	ement rings, wedding rings, heirloom jewelry,	, watches, gems, g	old, silver
■ No	rm animals oles: Dogs, cats, birds, h	norses			
■ No	her personal and hous		ot already list, including any health aids y	ou did not list	
15. Add ti for Pa	he dollar value of all o art 3. Write that numbe	f your entries from Par r here	rt 3, including any entries for pages you h	ave attached	\$600.00
	scribe Your Financial Ass				
Do you ow	n or have any legal or	equitable interest in a	ny of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions,
□ No			ne, in a safe deposit box, and on hand when	you file your petitio	n
■ Yes	•••••••••••••••••••••••••••••••••••••••				
			Ca	ash	\$300.00
	ts of money les: Checking, savings, institutions. If you h	or other financial accou ave multiple accounts w	nts; certificates of deposit; shares in credit unith the same institution, list each.	nions, brokerage he	ouses, and other similar
Yes			Institution name:		
	17 .1	. Checking	CHASE CHECKING ACCOUNT 3	180	\$100.00
8. Bonds, Exampl	mutual funds, or publi les: Bond funds, investn	icly traded stocks nent accounts with broke	erage firms, money market accounts		
☐ Yes		Institution or issuer na	me:		
9. Non-pul joint ve ■ No	blicly traded stock and enture	l interests in incorpora	ated and unincorporated businesses, incl	uding an interest	in an LLC, partnership, and
☐ Yes. (n about them ame of entity:		ownership:	
Negotia	<i>ble instruments</i> include	personal checks, cashid	able and non-negotiable instruments ers' checks, promissory notes, and money or fer to someone by signing or delivering them	rders. n.	

Official Form 106A/B

Schedule A/B: Property

page 3

C	ebtor 1	CYNTHIA EQUELS		Case number (if known)	19-11214-MKN
	☐ Yes	Give specific information abo			
21	. Retire Exam	ment or pension accounts ples: Interests in IRA, ERISA,	Keogh, 401(k), 403(b), thrift saving	is accounts, or other pension or profit-sharing p	olans
		List each account separately. Type of a	ccount: Institution n	iame:	
22	Your s Exam	ty deposits and prepayment thare of all unused deposits yo ples: Agreements with landlord	III have made so that you may cont	tinue service or use from a company ctric, gas, water), telecommunications companie	es, or others
	■ No □ Yes.		Institution n	ame or individual:	
23.	Annuit	ies (A contract for a periodic p	eayment of money to you, either for	life or for a number of years)	
	■ No □ Yes	lssuer name an	d description.	, ,	
24.	Interest 26 U.S.	s in an education IRA, in an C. §§ 530(b)(1), 529A(b), and	account in a qualified ABLE pro 529(b)(1).	gram, or under a qualified state tuition prog	ram.
	Yes	Institution name	and description. Separately file the	e records of any interests.11 U.S.C. § 521(c):	
25.	Trusts, ■ No	equitable or future interests	in property (other than anything	g listed in line 1), and rights or powers exerc	cisable for your benefit
	☐ Yes.	Give specific information abou	it them		
	⊨xamp	s, copyrights, trademarks, tra les: Internet domain names, w	ade secrets, and other intellectua ebsites, proceeds from royaities an	I property and licensing agreements	
	No	Give specific information abou			
27.	License	es, franchises, and other gen	neral intangibles	holdings, liquor licenses, professional licenses	
		Give specific information abou	t them		
Мо	ney or p	roperty owed to you?			Current value of the
					portion you own? Do not deduct secured claims or exemptions.
	Tax refu ■ No	inds owed to you			
		live specific information about	them, including whether you alread	dy filed the returns and the tax years	
29.	Family s Example	support es: Past due or lump sum alim	ony, spousal support, child support	t, maintenance, divorce settlement, property se	ettlement
	■ No	ive specific information		, and the common, property oc	nue ment
30.	Other ar Example	nounts someone owes you es: Unpaid wages, disability in benefits; unpaid loans you	surance payments, disability benefi made to someone else	its, sick pay, vacation pay, workers' compensa	ition, Social Security
	■ No □ Yes. 0	Give specific information			
	Interests <i>Example</i>] No	s in insurance policies es: Health, disability, or life insu	urance; health savings account (HS	SA); credit, homeowner's, or renter's insurance	
		ame the insurance company o			
Offici	al Form	Company 106A/B	name: Schedule A/B: Proj	Beneficiary: perty	Surrender or refund

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page 4

Best Case Bankruptcy

Del	otor 1	CYNTHIA EQUELS	Case number (if known)	19-11214-MKN	
				value:	
		PRIME AMERICA - TERM			\$0.00
•	If you a someo ■ No	erest in property that is due you from someone who has died are the beneficiary of a living trust, expect proceeds from a life insurance policy, or a ne has died. Give specific information	re currently entitled to reco	eive property because	
33.	Claims Examp	against third parties, whether or not you have filed a lawsuit or made a deman les: Accidents, employment disputes, insurance claims, or rights to sue	nd for payment		
	■ No □ Yes.	Describe each claim			
	Nο	ontingent and unliquidated claims of every nature, including counterclaims of	the debtor and rights to	set off claims	
		ancial assets you did not already list			
	No	Give specific information			
36.	Add th	ne dollar value of all of your entries from Part 4, including any entries for pages rt 4. Write that number here	s you have attached	\$400.0	00
Part	5: Des	• cribe Any Business-Related Property You Own or Have an Interest In. List any real estate	in Part 1.		
		wn or have any legal or equitable interest in any business-related property? o Part 6.			••
-		o Part 6.			
Part	6: Dese	cribe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest I I own or have an interest in farmland, list it in Part 1.	n.		
		own or have any legal or equitable interest in any farm- or commercial fishing- o to Part 7.	related property?		
	□ Yes.	Go to line 47.			
Part	7:	Describe All Property You Own or Have an Interest in That You Did Not List Above			
1	Example	nave other property of any kind you did not already list? os: Season tickets, country club membership		-	
	No Yes. G	ive specific information			
54.	Add th	e dollar value of all of your entries from Part 7. Write that number here		\$0.0	0

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Del	otor 1 CYNTHIA EQUELS			Case number (if known)	19-11214-MKN
Par	List the Totals of Each Part of this Form				
5 5.	Part 1: Total real estate, line 2				\$408,850.00
56.	Part 2: Total vehicles, line 5		\$2,000,00		
57.	Part 3: Total personal and household items, line 15		\$600.00		
58.	Part 4: Total financial assets, line 36		\$400.00		
59.	Part 5: Total business-related property, line 45	-	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	-	\$0.00		
61.	Part 7: Total other property not listed, line 54	+	\$0.00		
62.	Total personal property. Add lines 56 through 61		\$3,000.00	Copy personal property to	stal \$3,000.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62				\$411,850.00

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Fill in this infor	mation to identify your	case:		
Debtor 1	CYNTHIA EQUEL	.S	·	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filling)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF NEVADA	_	
	19-11214-MKN			
Case number if known)	19-11214-MKN			☐ Check if this is an

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

P	art 1: Identify the Property You Claim as	Exempt								
1.	Which set of exemptions are you claiming	1? Check one only, eve	n if yo	our spouse is filing with you.						
	■ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)									
☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)										
2.	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.									
	Brief description of the property and line on Schedule A/B that lists this property	42		ount of the exemption you claim	Specific laws that allow exemption					
		Copy the value from Schedule A/B	Check only one box for each exemption.							
	1530 WAGON WHEEL DR. Henderson, NV 89002 Clark County	\$408,850.00			Nev. Rev. Stat. §§ 21.090(1)(I)					
	Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	and 115.050					
	2003 TOYOTA TUNDRA	\$2,000.00			Nev. Rev. Stat. § 21.090(1)(f)					
	Line from Schedule A/B: 3.1		Ħ	100% of fair market value, up to any applicable statutory limit						
	HOUSEHOLD GOODS	\$500.00			Nev. Rev. Stat. § 21.090(1)(b)					
	Line from Schedule A/B; 6.1			100% of fair market value, up to any applicable statutory limit						
	WEARING APPAREL Line from Schedule A/B: 11.1	\$100.00			Nev. Rev. Stat. § 21.090(1)(b)					
	Line from Schedule AVB: 11.1			100% of fair market value, up to any applicable statutory limit						
	Cash Line from Schedule A/B: 16.1	\$300.00			Nev. Rev. Stat. § 21.090(1)(z)					
	Line nom <i>Schedule AVD</i> . 10. 1			100% of fair market value, up to any applicable statutory limit						

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Debte	or 1	NTHIA EQUELS			Case number (if known)	19-11214-MKN	
£	Brief description of the property and line on Schedule A/B that lists this property Checking: CHASE CHECKING ACCOUNT 3180 Line from Schedule A/B: 17.1		portion you own		ount of the exemption you claim	Specific laws that allow exemption	
					ack only one box for each exemption.		
			\$100.00	0.00 🖂		Nev. Rev. Stat. § 21.090(1)(z)	
			■ 100% of fair market value, up to any applicable statutory limit				
3. A (\$	tre you e Subject t ■ No	claiming a homestead exemption o adjustment on 4/01/22 and every	of more than \$170,350 3 years after that for ca)? ses fi	led on or after the date of adjustmen	t.)'	
	Yes.	Did you acquire the property cover No Yes	ed by the exemption wit	hin 1	215 days before you filed this case?	,	

	se 19-112	14-mkn Doc 22 E	intered U5/29	9/19 14:29:33	Page 11 01 2	2
Fill in this information	n to identify y	our case:				
Debtor 1 C	YNTHIA EQU	JELS			_	
	st Name	Middle Name	Last Name		<u></u>	
Debtor 2 (Spouse If, filing) Fil	st Name	Middle Name	Last Name		_	
United States Bankrup	tcy Court for th		Cast Maille			•
Case number 19-14	1044 1141		· · · · · · · · · · · · · · · · · · ·		-	
(if known)	214-MKN					
					_	k if this is an
Official Form 40	10D		_		aner	ided filing
Official Form 10						
Schedule D:	Creditor	s Who Have Clain	ns Secured	d by Propert	y	12/15
Be as complete and accu	rate as possible	If two married people are filing t	amadh an la ath			
number (if known).	3,	and all all all all all all all all all al	ich it to this form. Or	n the top of any additio	nal pages, write your n	ame and case
1. Do any creditors have o						
□ No. Check this t	ox and submit	this form to the court with your	other schedules. Yo	ou have nothing else t	a report on this form	
Yes. Fill in all of	the information	below.		The state of the s	o report on this long.	
Part 1: List All Sec	ured Claims					
2. List all secured claims	. If a creditor has	more than one secured claim, list th	ne creditor congretaly	Column A	Column B	Column C
TO GACH CIAIM, ILIMOTE INS	n one creditor na	s a particular claim, list the other cre fical order according to the creditor's	oditore in Dawl O A -	Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
2.1 LOANCARE		Describe the property that secu	ures the claim:	value of collateral. \$330,000.00	claim \$408,850.00	Îf any
Creditor's Name		1530 WAGON WHEEL D	R.	40001000.00	Ψ+00,030.00	\$0.00
P.O. BOX 8068		Henderson, NV 89002 C	lark County			
Virginia Beach,	VΔ	As of the date you file, the clair	n is: Check all that			
23450-4968	10	apply. □ Contingent				
Number, Street, City, Sta	ate & Zip Code	☐ Unliquidated				
-	·	☐ Disputed		-		
Who owes the debt? Ch	eck one.	Nature of lien. Check all that ap	ply.			
Debtor 1 only		An agreement you made (such car loan)	n as mortgage or secu	red		
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 o	nak	•				
		Udament lion from a lawwit	, mechanic's lien)			
		Other (including a right to offset)	et) First Mortga	ge		
Date debt was incurred		Last 4 digits of account r	number 3556			-
At least one of the debte Check if this claim relacementity debt Date debt was incurred Add the dollar value of y If this is the last page of Write that number here:	ors and another utes to a our entries in Co		number 3556 number here:	\$330,000 \$330,000		

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

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Fill in th	is information to identify you	r case:			
Debtor 1	CYNTHIA EQUE	LS		_	
Debtor 2	First Name	Middle Name	Last Name		
(Spouse if, f		Middle Name	Last Name		
United S	tates Bankruptcy Court for the:	DISTRICT OF NEVADA			
Casa nun	mbon 40 44044 Bares			<u> </u>	
Case nur	mber <u>19-11214-MKN</u>				
				· -	Check if this is an
					amended filing
-	Form 106E/F			•	
Sched	ule E/F: Creditors V	<u>Vho Have Unsecu</u>	RIORITY claims and Part 2 for credit		12/15
eft. Attach name and c		ge. If you have no information	Also list executory contracts on Sci J6G). Do not include any creditors wasce is needed, copy the Part you nead to report in a Part, do not file that I		
	y creditors have priority unsecure				
	. Go to Part 2.				
☐ Yes					
	List All of Your NONPRIORI	P) (1)			
Part 2:		LY Unsecured Claims			
	creditors have nonpriority unse				
3. Doany □ No. _ ·	reditors have nonpriority unse You have nothing to report in this p	cured claims against you?	rt with your other schedules.		
3. Doany □ No. • Yes 4. Listail	y creditors have nonpriority unse You have nothing to report in this p s. of your nonpriority unsecured c	cured claims against you? part. Submit this form to the cou	r of the araditor who holds conhist	im. If a creditor has more tha	an one nonpriority
3. Do any □ No. □ Yes 4. List all unsecu	y creditors have nonpriority unse You have nothing to report in this p s. of your nonpriority unsecured cl red claim. list the creditor separatel	cured claims against you? part. Submit this form to the could	rt with your other schedules. r of the creditor who holds each cla listed, identify what type of claim it is, f you have more than three nonpriority		
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Debto	r 1 CYNTHIA EQUELS	Case number (if known) 19-11214-MKN	
4.2	CLARK COUNTY ASSESSOR Nonpriority Creditor's Name C/O BANKRUPTCY CLERK	Last 4 digits of account number When was the debt incurred?	\$0.00
	500 S. GRAND CENTRAL PKWY BOX 551401 Las Vegas, NV 89155 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	or o	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	Other. Specify NOTICE ONLY	
4.3	DEPT. OF EMPLOYMENT, TRAINING & REHAB Nonpriority Creditor's Name	Last 4 digits of account number	\$0.00
•	EMPLOYMENT SECURITY DIVISION 500 EAST THIRD STREET Carson City, NV 89713	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community debt	☐ Student loans	
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other, Specify NOTICE ONLY	
4.4	INTERNAL REVENUE SERVICE Nonpriority Creditor's Name	Last 4 digits of account number	\$0.00
	P.O. BOX 7346 Philadelphia, PA 19101-7346	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	Other. Specify NOTICE ONLY	

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Debt	tor 1 CYNTHIA EQUELS	Case number (if known) 19-11214-MKN	
4.5	NEVADA DEPARTMENT OF TAXATION	Last 4 digits of account number	#0.00
	Nonpriority Creditor's Name BANKRUPTCY SECTION 555 E. WASHINGTON AVENUE, #1300	When was the debt incurred?	\$0.00
	Las Vegas, NV 89101 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify NOTICE ONLY	
4.6	SOCIAL SECURITY ADMINISTRATION		
•	Nonpriority Creditor's Name	Last 4 digits of account number	\$0.00
	OFFICE OF THE REGIONAL CHIEF COUNSEL REGION IX 160 SPEAR STREET, SUITE 800	When was the debt incurred?	
	San Francisco, CA 94105-1545		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	Пол	
	Debtor 2 only	☐ Contingent	
	Debtor 1 and Debtor 2 only	☐ Unliquidated	
	☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify NOTICE ONLY	
		— Other. Specify	
4.7	UNITED STATES TRUSTEE Nonpriority Creditor's Name	Last 4 digits of account number	\$0.00
	300 LAS VEGAS BLVD., SOUTH SUITE 4300 Las Vegas, NV 89101	When was the debt incurred?	
,	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify NOTICE ONLY	

Debtor 1 CYNTHIA EQUELS

Case number (if known)

19-11214-MKN

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

	6a.	Demontle comment while the			Total Claim
Total	va.	Domestic support obligations	6a.	\$	0.00
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	, —	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
					0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
Total	6f.	Student loans	6f.	\$	Total Claim 0.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that	Α.		4.00
	6h.	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	6g.	\$	0.00
	6i.		6ի.	\$	0 .00
	JI.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	0.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	0.00

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	0430 13 11214	111Kii D00 22	Entered 00/20/10 14.	20.00 Tage 10 of	
Fill in this info	rmation to identify your	case:			
Debtor 1	CYNTHIA EQUEL	S			
Debtor 2	First Name	Middle Name	Last Name		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	ankruptcy Court for the:	DISTRICT OF NEVADA	Α		
Case number	19-11214-MKN		-		
(if known)	-			-	heck if this is an
				ar	mended filing
Official Fo	orm 106G				
		Contracts ar	nd Unexpired Leas	SAS	12/15
Be as complete information. If n	and accurate as possib	le. If two married people opy the additional page,	are filing together, both are e	qually responsible for supp	luina coment
1. Do you hav	e any executory contrac	ts or unexpired leases?	?		
⊔ No. Che	ck this box and file this for	m with the court with you	rother schedules. You have not	ning else to report on this form	n.
■ Yes. Fill	in all of the information be	low even if the contacts of	of leases are listed on Schedule A	<i>∜B:Property</i> (Official Form 10)6 A/B).

List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code

State what the contract or lease is for

LIFE STORAGE UNIT 5500 CONESTOGA WAY Henderson, NV 89002

and unexpired leases.

STORAGE UNIT

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	Case 19-11.	214-IIKII DUC 22	Littered 03/23/1	9 14.29.33 Fage 17	01 22
Fill in t	this information to identify	your case:			
Debtor	1 CYNTHIA EQ	UELS			
	First Name	Middle Name	Last Name		
Debtor					
(Spouse i		Middle Name	Last Name		
United	States Bankruptcy Court for t	he: DISTRICT OF NEVAL	DA		
Case n					
(if known)					Check if this is an
					amended filing
Offic	ial Form 106H				
Sche	edule H: Your C	odebtors			
	Jaaio III Todi O	<u>odebtoi3</u>			12/15
your na	me and case number (if kno	own). Answer every question	n the Additional Page to n.	on. If more space is needed, co this page. On the top of any A	dditional Pages, write
1. L	Do you have any codebtors	? (If you are filing a joint case	, do not list either spouse	as a codebtor.	
□ <i>Y</i>					
2. V Ariz	Vithin the last 8 years, have cona, California, Idaho, Louisi	you lived in a community μ ana, Nevada, New Mexico, P	property state or territory uerto Rico, Texas, Washir	? (<i>Community property states an</i> gton, and Wisconsin.)	d territories include
	lo. Go to line 3. ′es. Did your spouse, former	spouse, or legal equivalent liv	e with you at the time?		
For	ne z agam as a codeptor of	ily it that person is a duara	otor or cosigner. Make s	f your spouse is filing with you ure you have listed the creditor G). Use Schedule D, Schedule	on Cabadula D. /Official
	Column 1: Your codebtor Name, Number, Street, City, State a	nd ZIP Code		Column 2: The creditor to w Check all schedules that appl	hom you owe the debt y:
3.1				☐ Schedule D, line	
	Name		<u> </u>	☐ Schedule E/F, line	
				☐ Schedule G, line	
	Number Street		<u>. </u>		
	City	State	ZIP Code		
3.2				☐ Schedule D, line	
	Name			Schedule E/F, line	
				☐ Schedule G, line	
	Number Street				
	City	State	ZIP Code		

Debtor 1	CYNTHIA E	QUELS							
Debtor 2 (Spouse, if filing)									
United States Bankrupt	cy Court for the	E DISTRICT OF NEVA	DA						
Official Form			_			Check if this is An amend A supplem 13 income	ed filing lent showing as of the f	ng postpetition	n chapter :
Schedule I: Y		ome sible. If two married pec	nale and green de la company	/m					12/18
spouse. If you are sepa attach a separate sheet	rated and you to this form. Employment	are married and not fill ir spouse is not filing w On the top of any addit	ing joinny, and your s	pouse	IS II	ving with you, incl ion about your sp d case number (if	ude infor ouse. If m known). <i>I</i>	mation about ore space is Answer every	your
If you have more th	an one iob		☐ Employed			□ Empl		iling spouse	
attach a separate p information about a employers.	age with	Employment status	■ Not employed			•	mployed		
include part-time, s self-employed work		Occupation Employer's name	DISABLED	_					
Occupation may incor homemaker, if it		Employer's address							
		How long employed to	hora?				_		·
									
Part 2: Give Detai	ils About Mon								
	ils About Mon			ort for	any	line, write \$0 in the	space. Inc	clude your nor	ı-filing
stimate monthly incompouse unless you are se	e as of the da parated.	thly Income te you file this form. If y re than one employer, co	ou have nothing to rep						_
stimate monthly incompouse unless you are se you or your non-filing sp ore space, attach a sepa	ne as of the da parated. House have mo arate sheet to t	thly Income Ite you file this form. If y re than one employer, co his form.	ou have nothing to reprime the information				n on the li		_
stimate monthly incompouse unless you are se you or your non-filing spore space, attach a sepa	ne as of the da parated. House have mo arate sheet to t	thly Income te you file this form. If y re than one employer, co	you have nothing to reputation the information			oyers for that perso	n on the li	nes below. If y otor 2 or	_
stimate monthly incompouse unless you are se you or your non-filing spore space, attach a sepa	ne as of the da parated. nouse have mo arate sheet to t wages, salar naid monthly, ca	thly Income Ite you file this form. If you file this form. If you file this form. It you file this form. It you file this form. If you file this form.	you have nothing to reputation the information	for all e	mple	oyers for that perso	n on the li For Det non-fili	nes below. If y otor 2 or ng spouse	_

De	btor 1	CYNTHIA EQUELS		_	С	ase number (if known)	19	-11214-	MKN	
	0.				_	For Debtor 1		or Debto on-filing		
	Cop	y line 4 here		4.		\$0.00	\$		N/A	<u>. </u>
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Secu	rity deductions	5a.		\$0.00	\$		N/A	
	5b.	Mandatory contributions for ret		5b.		\$0.00	\$		N/A	<u>.</u>
	5c.	Voluntary contributions for reti		5c.		\$0.00	\$		N/A	<u>.</u>
	5d. 5e.	Required repayments of retirent Insurance	ent fund loans	5d.		\$0.00	\$		N/A	<u> </u>
	5f.	Domestic support obligations		5e.		9.00	\$		N/A	_
	5g.	Union dues		5f.		90.00	\$		N/A	_
	5h.	Other deductions. Specify:		5g. 5h.		\$ 0.00 \$ 0.00	+ \$		N/A	
6.	Add	the payroll deductions. Add lines	5a+5b+5c+5d+5e+5f+5a+5b	— 51 6.	· ·				N/A	
7.		ulate total monthly take-home pa	· ·		4	0.00	\$		N/A	_
				7.	\$	0.00	\$		N/A	<u>-</u>
8.	List 8a.	profession, or farm Attach a statement for each prope receipts, ordinary and necessary to	r and from operating a business,							
	οι.	monthly net income.		8a.	9	0.00	\$		N/A	
	8b.	Interest and dividends		8b.	\$	0.00	\$		N/A	_
	8c.	regularly receive Include alimony, spousal support, settlement, and property settlement	ou, a non-filing spouse, or a dependen child support, maintenance, divorce nt.	t 8c,	\$	0.00	\$		N/A	
	8d.	Unemployment compensation		8d.	\$	0.00	\$		N/A	
	8e.	Social Security		8e.	\$	798.00	\$		N/A	
	8f.	Other government assistance the Include cash assistance and the vithat you receive, such as food star Nutrition Assistance Program) or his Specify:	alue (if known) of any non-cash assistance nps (benefits under the Supplemental	e 8f.	\$		\$			_
	8g.	Pension or retirement income		— 8g.	\$	0.00	\$ *		N/A N/A	_
	8h.	Other monthly income. Specify:	MONTHLY CONTRIBUTIONS FROM SISTER	8h.+	· \$		Ψ_ + \$		N/A	-
9.	Add	all other income. Add lines 8a+8b	+8c+8d+8e+8f+8g+8h.	9.	\$_	2,198.00	\$_		N/A	<u> </u>
40	0.1.				_				1 -	-
10.		ulate monthly income. Add line 7 d he entries in line 10 for Debtor 1 and		10. \$		2,198.00 + \$_		N/A	= \$	2,198.00
11.	Includ other	le contributions from an unmarried ; friends or relatives. ot include any amounts already inclu	the expenses that you list in Schedule partner, members of your household, your ded in lines 2-10 or amounts that are not	depen		-		Schedule	9 <i>J</i> . +\$	0.00
12.	Add to Write applie	that amount on the Summary of Sci	ine 10 to the amount in line 11. The res nedules and Statistical Summary of Certa	sult is th in Liabi	ne c	ombined monthly in s and Related <i>Data</i>	come if it	e. 12.	\$	2,198.00
13.	Do yo	ou expect an increase or decrease	within the year after you file this form	?					Combin	ned y income
		No.	<u>-</u>							
		Yes. Explain:	· · · · · · · · · · · · · · · · · · ·							

Official Form 106I

Fill in t	his informat	ion to identify	your case:			ı			
Debtor	1	CYNTHIA E	QUELS] _	`hec	k if this is:	
	_					l		An amended filing	
Debtor 2	2 e, if filing)	····] .	A supplement show	ving postpetition chapter
Opodac	, a magy							13 expenses as of	the following date:
United S	States Bankrı	ptcy Court for the	e: DISTR	ICT OF NEVADA		ĺ	1	MM / DD / YYYY	
Case nu		11214-MKN							
(if know	n)					İ			
		4001]			
		m 106J J: Your	Evno	2000					
Be as c	complete a	nd accurate a	EXPE	If two married manuals	one filing to setting the		_		12/1
		re space is no). Answer eve		. If two married people a ach another sheet to this n.	s form. On the top of	otn are e any add	iqua litio	illy responsible fo nal pages, write y	r supplying correct our name and case
Part 1:		e Your House	ehold						
	this a joint								
	No. Go to I								
ᆸ		Debtor 2 live	in a separ	ate household?					
	□ No								
	⊔ Yes	s. Debtor 2 mus	st file Offici	al Form 106J-2, <i>Expense</i>	s for Separate House	hold of D	ebto	or 2,	
2. Do	you have	dependents?	■ No			•			
	not list Det btor 2.	otor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor	2		Dependent's age	Does dependent live with you?
	not state th	-							□ No
dep	pendents na	ames.							□ Yes
						- ·			□ No
									☐ Yes
									□ No
						***			☐ Yes
									□ No
3. Do	VALIF AVDA	acaa inaluda							☐ Yes
ехр	enses of p	nses include eople other th our depender	nan 🖳	No Yes					
		•							
Part 2:	Estimate	Your Ongoir	ng Monthly	/ Expenses					
expense applicat		ate after the b	our bankru pankruptcy	ptcy filing date unless y is filed. If this is a supp	ou are using this for other of the control of the c	rm as a s J, check	supp the	plement in a Chap box at the top of	ter 13 case to report the form and fill in the
nclude	expenses p	paid for with n	ion-cash g	jovernment assistance i	f you know				
ne value Official	e of such a Form 106 i.	ssistance and	i have incl	uded it on Schedule I:	our Income			V	
Omolai	. 01111 1001.	,						Your exper	ises
. The	rental or h	ome ownerst	nip exnens	ses for your residence. I	nolude firet modesee				And the state of t
payı	ments and a	any rent for the	ground or	lot.	neidde mat mortgage	4.	\$		0.00
lf no	ot included	in line 4:							
4a.	Real esta	ate taxes				1 =	ø		
4b.		homeowner's,	or renter's	insurance		4a.			0.00
4c.	Home ma	aintenance, ren	pair, and ur	keep expenses		4b. 4c.			0.00
4 d.	Homeow	ner's association	on or condi	ominium dues		4c. 4d.	Ф \$		20.00
Add				ır residence, such as ho	me equity loans		\$ -	<u>.</u>	0.00
		- • •	•			٥.	Ψ_		0.00

Official Form 106J

De	btor 1	CYNT	HIA EQUELS	Case nu	ımber (if known)	19-11214-MKN
6.	Utiliti	ies:				
	6a.	Electric	ity, heat, natural gas	6	a. \$	
	6b.		sewer, garbage collection	6k	·	200.00
	6c.		one, cell phone, Internet, satellite, and cable services		·	100.00
	6d.	Other. 8	Specify:	60	· -	160.00
7.	Food		usekeeping supplies	60		0.00
8.	Child	care an	d children's education costs	7	·	<u>2</u> 50.00
9.			ndry, and dry cleaning	8	· - ·	0.00
	Perso	nnai car	e products and services	S	· •	30.00
11.			dental expenses	10). \$	40.00
				11	. \$	155.00
12.	Do no	st include	n. Include gas, maintenance, bus or train fare. car payments.	40		
13.	Enter	tainmen	t, clubs, recreation, newspapers, magazines, and books		. \$	100.00
14	Chari	table co	ntributions and religious donations	13		0.00
15	Insura	ance	minutations and religious dollations	14	. \$	0.00
			insurance deducted from your pay or included in lines 4 or 20.			
	15a.	Life insu	rance	4.5		
			nsurance	15a	·	11.00
			insurance	15b	·	50.00
			surance. Specify:	15c		200.00
16				15d.	. \$	0.00
10.	Specif	i. Do not iv	include taxes deducted from your pay or included in lines 4 or 20.		<u> </u>	
17			lease payments:	16.	\$	0.00
17.	17a	Car navr	nents for Vehicle 1			
	17b	Car payr	nents for Vehicle 2	17a.	\$	
		Other. S		17b.	\$	0.00
				17c.	\$	0.00
40		Other. S		17d.	\$	0.00
18.	Your p	payment	s of alimony, maintenance, and support that you did not report as			0.00
	ueauc	tea mon	l Your pay on line 5. Schedule I. Your Income (Official Form 406)	18.	\$	0.00
13.	Chacif	paymen	ts you make to support others who do not live with you.		\$	0.00
20	Specify			19.	<u> </u>	
20.	20a I	reai pro _l Mortana	perty expenses not included in lines 4 or 5 of this form or on <i>Sche</i> es on other property	dule I: Yo	our Income.	
		Real esta		20a.	\$	0.00
				20b.	\$	0.00
	200. F	Property,	homeowner's, or renter's insurance	20c.	\$	0.00
	20a. N	viaintena	nce, repair, and upkeep expenses	20d.	\$	0.00
			ner's association or condominium dues	20e.	\$	0.00
21.	Other:	Specify:	STORAGE UNIT	21.	+\$	
22	Calcul	ata vaur	monthly expenses			200.00
LE.	222 An	ate your	through 21.			
					\$	1,516.00
	220. CC	opy line z	22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
	22c. Ad	ld line 22	a and 22b. The result is your monthly expenses.		\$	1,516.00
23	Calcula	afa vaur	monthly net income.	1		1,516.00
_0,	23a C	ony line	12 (volume combined monthly in a set of the			
	236 C	John Man	12 (your combined monthly income) from Schedule I.	23a.	\$	2,198.00
	23D. C	opy you	r monthly expenses from line 22c above.	23b.	-\$	1,516.00
	22. 0	·		1		.,0.0.00
	∠აc. ა ⊤	ho rocul	our monthly expenses from your monthly income.		_	
	'	HE ICSÚII	is your monthly net income.	23c.		682.00
24. 1	Do νοιι	expect	an increase or decrease in your expenses within the year after you	#11 ···	_	
	O, OACH	iipic, uv ji	o capeuro illigit udvillu illi villi cer illen within the vegrat de de vers eves et le le l	I file this	form?	d
(modificat	tion to the	terms of your mortgage?	nongage p	ayment to increas	e or decrease because of a
	No.		•			
	☐ Yes.		Explain here:			
	63.		maple in the control of the control			

ebtor 1	CYNTHIA EQUEL	S		
	First Name	Middle Name	Last Name	
ebtor 2				
ouse if, filing)	First Name	Middle Name	Last Name	
ited States i	Bankruptcy Court for the:	DISTRICT OF NEVADA		
se number	19-11214-MKN			
nown)				☐ Check if this is an amended filing
	4000			
	<u>rm 106Dec</u>			
eclara	ition About a	n Individual I	Debtor's Schedu	ıles 121º
u must file th	nis form whenever you fil	e bankruptcy schedules o	sible for supplying correct inform or amended schedules. Making a uptcy case can result in fines up	Call A A A A A A
must file the	nis form whenever you filey or property by fraud in 18 U.S.C. §§ 152, 1341, 1	e bankruptcy schedules o	r amandad achadulas Billius -	Call and a second
must file thaining moners, or both.	nis form whenever you filed	e bankruptcy schedules o	r amandad achadulas Billius -	Call and a second
n must file the aining mone rs, or both.	nis form whenever you fil ey or property by fraud in 18 U.S.C. §§ 152, 1341, 19 gn Below	e bankruptcy schedules o connection with a bankru 19, and 3571.	r amandad achadulas Billius -	false statement, concealing property, or to \$250,000, or imprisonment for up to 20
u must file the aining mone rs, or both.	nis form whenever you fil ey or property by fraud in 18 U.S.C. §§ 152, 1341, 19 gn Below	e bankruptcy schedules o connection with a bankru 19, and 3571.	r amended schedules. Making a uptcy case can result in fines up	false statement, concealing property, or to \$250,000, or imprisonment for up to 20
I must file the aining mone rs, or both. Signification of the second states of the second sta	nis form whenever you fil ey or property by fraud in 18 U.S.C. §§ 152, 1341, 19 gn Below	e bankruptcy schedules o connection with a bankru 19, and 3571.	r amended schedules. Making a uptcy case can result in fines up	false statement, concealing property, or to \$250,000, or imprisonment for up to 20 forms?
u must file the aining mone irs, or both. Signification Did you particular No	nis form whenever you fil ey or property by fraud in 18 U.S.C. §§ 152, 1341, 19 gn Below	e bankruptcy schedules o connection with a bankru 19, and 3571.	r amended schedules. Making a uptcy case can result in fines up y to help you fill out bankruptcy	false statement, concealing property, or to \$250,000, or imprisonment for up to 20 forms?
u must file the aining mone irs, or both. Sig Did you pa No Yes.	nis form whenever you fill by or property by fraud in 18 U.S.C. §§ 152, 1341, 19 gn Below ay or agree to pay someo	e bankruptcy schedules o connection with a bankru 519, and 3571.	r amended schedules. Making a uptcy case can result in fines up y to help you fill out bankruptcy	false statement, concealing property, or to \$250,000, or imprisonment for up to 20 forms? Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119
u must file the aining mone irs, or both. Sig Did you pa No Yes.	nis form whenever you fill by or property by fraud in 18 U.S.C. §§ 152, 1341, 19 gn Below ay or agree to pay someo	e bankruptcy schedules o connection with a bankru 519, and 3571.	r amended schedules. Making a uptcy case can result in fines up y to help you fill out bankruptcy	false statement, concealing property, or to \$250,000, or imprisonment for up to 20 forms? Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119
Did you pa No Under penathat they ar	nis form whenever you file ey or property by fraud in 18 U.S.C. §§ 152, 1341, 19 gn Below ay or agree to pay someo Name of person	e bankruptcy schedules o connection with a bankru 519, and 3571.	r amended schedules. Making a uptcy case can result in fines up y to help you fill out bankruptcy	false statement, concealing property, or to \$250,000, or imprisonment for up to 20 forms? Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119
Did you pa Did you pa No Ves. Under penathat they ar X /s/ CYNTI	nis form whenever you file ay or property by fraud in 18 U.S.C. §§ 152, 1341, 19 gn Below ay or agree to pay someo Name of person alty of perjury, I declare the true and correct. NTHIA EQUELS HIA EQUELS	e bankruptcy schedules o connection with a bankru 519, and 3571.	r amended schedules. Making a uptcy case can result in fines up by to help you fill out bankruptcy A A A A A A A A A A A A A	false statement, concealing property, or to \$250,000, or imprisonment for up to 20 forms? Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
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Official Form 106Dec

Declaration About an Individual Debtor's Schedules